

**MULTIPLE DEPENDENT CLAIM
FEEDBACK CIRCULATION SHEET**
(FOR USE WITH FORM FTO-875)

SERIAL **40-5388070**
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
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TOTAL IND.	1					
TOTAL DEP.	10					
TOTAL CLAIMS	11					

FTO-875A (REV. 10-75)

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

U.S. DEPARTMENT OF COMMERCE

BEST AVAILABLE COPY